

## STATE OF NEVADA DEPARTMENT OF BUSINESS AND INDUSTRY DIVISION OF MORTGAGE LENDING

1830 College Parkway, Suite 100 Carson City, NV 89706 (775) 684-7060 Fax (775) 684-7061 www.mld.nv.gov

## APPLICATION FOR REGISTRATION

(Credit Service Organization)

Mail to the Division of Mortgage Lending at the above address.

Pursuant to NRS 598.752(1), before advertising its services or conducting business in the State of Nevada, a credit service organization must register pursuant to NRS 598.721 and deposit security in the amount of \$100,000.00 pursuant to NRS 598.726.

Pursuant to NRS 598.721, the undersigned hereby makes application to the Commissioner of the Division of Mortgage Lending ("the Commissioner") for registration.

Name of Credit Service Organization:	
Address of Credit Service Organization:	Ohn at Address
	Street Address
City	State Zip
Telephone No.: (Must be a Local Land Line)	Fax No.:
E-Mail:(Mandatory)	Taxpayer Identification No.:
Name of Key Employee:	
Key Employee's Telephone No.: (Must be a Local Land Line)	Key Employee's E-Mail:(Mandatory)
Key Employee's Fax No.:	

INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED.

<ol> <li>Please complete the following for all owners of the credit service organization app</li> </ol>	licant:
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Name	Address	Telephone No.	Social Security No.	Percentage of Interest Held (Must Equal 100%)	
2. List all employees of the	ne credit service organizat	ion applicant:			
3. Does the credit service  Yes  No	e organization currently ho	ld a bond?			
Bond No.:	Bond No.: Amount of Bond: \$				
Name and address of the	corporate surety issuing t	he bond:			
The number of clients to whom the credit service organization applicant is currently providing services:					

	Servic	e			Fee	
6. The credit service legal process:	e organizatio	n applicant designates the	e following	natural perso	n as its resident age	nt for service of
Name of Resident A	gent:					
Address of Resident	Agent:					
		Street Address		City	State	Zip
Resident Agent's Te	lephone No.	:(Must be a Local Land Line)		_Resident Ao	gent's Fax No.:	
Resident Agent's E-I	Mail:(Manda	tory)		_		
The credit service or legal process.	ganization a	pplicant acknowledges that	at it will co	ntinuously ma	aintain a resident age	ent for service of
i a € □ .	Original \$100 service orga nsured, or a and which is 678.755). Business Pra	0,000.00 bond or substitut nization applicant is the concertificate of deposit in a first federally insured or instruction of the concertificate of the concertification feet application feet of the concertification feet	obligor, iss inancial ins sured by a	ued by a bar stitution doing private insu	nk whose deposits a business in the State rer approved pursua	re federally e of Nevada ant to NRS
on behalf of the app Organization) and kn	licant name low the conte ally complet	n authorized to sign the wi d herein; that I have reac ents thereof and that the st ed this Application for F	d and signo atements i	ed the Applic made therein	ation for Registratior are true. By signing b	n (Credit Service elow, I represent

I acknowledge that all fees paid to the Division in cor	nection with this app	olication are non-refur	ıdable.	
Name of Applicant:(Credit Service Organization)				
By:Authorized Signatory (Owner)				
Printed Name:				
Date:				
Subscribed and sworn to before me the	day of		, 20	
Notary public in and for the County of		, State of		
My commission expires				
Notary Signature				
Notary Seal				